

Rx for Pennsylvania: Healing the Healthcare System

Summer Seminar • July 17, 2007

Rx for Pennsylvania: Healing the Health Care System, the twelfth annual Department of Health Policy Summer Seminar, was held on the Jefferson campus on July 17, 2007. The keynote and plenary presentations focused on impending and proposed changes to Pennsylvania's health care system, with an emphasis on the needs of the aging and elderly populations. Following the presentations, a reactor panel offered impromptu reactions to the issues raised and the real-world challenges of addressing them.

Secretary Nora Dowd Eisenhower, JD, from the Pennsylvania Department of Aging, provided context for the morning's discussions in the form of demographic trends. Global and national population projections reveal an impending sea change in the age 65+ cohort, with its attendant impact on health care and other services and costs. Because the cost of health care for this cohort is 3-5 times greater than the cost for those under age 65, the nation's healthcare spending is projected to increase by 25% by 2030. This upturn in health care needs – to such age-related issues as multiple chronic conditions, falls, and depression – will make the shortage of health care providers an even more acute problem. The key to addressing these challenges is to proactively determine how best to modify systems to adapt to the changing demographics.

Rosemary Greco, director of the Governor's Office on Health Care Reform, provided an update on the status of the state's health care initiatives. Governor Rendell's goal is to improve the accessibility, affordability, quality, and cost of health care. The Rx for Pennsylvania plan addresses these, plus chronic care and other issues.

Ms Greco briefly outlined the eight health care bills proposed for this legislative session that were approved late on July 16. Six of these bills recognize the expansion of scope of practice, which aligns with the concepts of the Chronic Care Model. Every clinician now must practice to the fullest extent possible. One bill concerns Health-Acquired Infection (HAI; formerly Hospital-Acquired Infection). It is now mandatory that all HAI be reported, including those occurring in nursing homes and ambulatory surgery centers. The focus is on transparency and surveillance (ie, reporting, monitoring, and comparative analysis). Pennsylvania is the first state to address surveillance. One bill concerns Assisted Living. This bill defines Assisted Living and establishes regulations and standards for these organizations; previously there were none.

Susan Reinhard, PhD, MSN, from the AARP Institute for Health, Healthcare Policy and Aging, spoke about the changes to policy and professional norms that must occur in order to meet the challenges of an aging society. She highlighted state policies that promote new models of caring for older adults, emphasizing scope of practice and changes across settings, and stressed the need to become more creative in the organization and regulation of health and long-term care.

Robert N. Butler, MD, President and CEO of the International Longevity Center-USA, delivered the keynote presentation, "The Longevity Revolution." Dr Butler discussed the findings of longevity science, key among which is the need to rethink diseases in lifespan terms. The foundations of many diseases considered specific to the elderly were laid much earlier in life. We must study the biology of aging itself.

Dr Butler also touched on ageism in America, and on the economic impact of longevity. Health and longevity are associated with increased wealth. He cited William Nordhaus' assertion that the value of increased longevity over the 20th century could be as large as the value of growth in all other goods and services over the same period.

Dr Butler stressed the need to redesign health care for an older America. Health care providers, social workers, and caregivers must be trained in the best techniques for caring for the elderly. Concurrently, there must be an emphasis on health promotion and disease prevention, improved chronic disease management, and enhanced end of life and palliative care. We must work toward transforming the culture and experience of aging.

A reactor panel of Jefferson colleagues and health care stakeholders, representing consumers, payors, and practitioners, offered unscripted responses to queries posed by moderator David B. Nash, MD, MBA. Among the issues addressed were the need for: transparency (monetary and care provision), education (for medical students and consumers), community-based care, realignment of provider and consumer incentives, development of advanced career trajectories for health care workers, and involvement of all stakeholders in solutions. The thought-provoking comments of the reactor panel and ensuing dialog with audience members made for stimulating discussion at the luncheon that followed.

A complete summary of the Summer Seminar presentations is forthcoming in the December issue of Disease Management. A podcast of the event is available through a link on the DHP website at http://www.jefferson.edu/dhp/education_ls.cfm.